

Hospital Quality Incentive Payment (HQIP) Program

Data Collection Tool (DCT) Provider Training

April 4, 2024

Department of Health Care Policy & Financing



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Agenda

1. Introduction
 - a) Program Background
 - b) New/Revised Measures
 - c) 2024 HQIP Timeline
2. DCT
 - a) Accessing the Application
 - b) User Roles
 - c) Application Features
3. Live Demo
4. Scoring Review and Reconsideration Process



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Program Background

- The Colorado Health Care Affordability Act (House Bill 09-1293), Section 25.5-4-402.3, Colorado Revised Statute authorizes HCPF pay an additional amount based upon performance to those hospitals that provide services that improve health care outcomes for their patients.
- Hospital Quality Incentive Payment (HQIP) Program incentive payments are based on each hospital's performance on the measures recommended by the HQIP Subcommittee and approved by the CHASE Board.
- Public Consulting Group (PCG) was awarded the contract in December 2017 to develop customized quality measures for the State of Colorado's HQIP program that will address the most critical healthcare quality issues facing Colorado.
- In addition, PCG was tasked with developing a web-based Data Collection Tool (DCT) that replaced the online survey to collect hospital quality metrics relating to areas of improvement within Colorado and calculate the provider-specific scoring that will be used to determine the HQIP incentive payments.



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2024 Measure Revisions

Health Equity Patient Safety Bundle

- The Reduction of Racial and Ethnic Disparities Patient Safety Bundle has been renamed the Health Equity Patient Safety Bundle
- Two elements, Leadership and Accessibility Regarding Communications Disabilities, have been added to Readiness. One element, Accountability, has been added to Reporting/Systems Learning
- Available points for this measure have increased from 10 to 15

Sepsis

- Evidence is only required for Process Measure 2.

Advance Care Planning

- The Advanced Care Planning Measure has been retired.
- The 5 available points from this measure have been reallocated to the Health Equity Patient Safety Bundle



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2024 HQIP Timeline

- May 1 - DCT Launch @ 9:00 AM MT
- May 31 - DCT Close @ 11:59 PM MT
- June-July - Submission Scoring
- Preliminary Scoring Report Released to Hospitals and Scoring Review and Reconsideration Period Begins within 90 days of DCT Close
- Step 1 of Scoring Review and Reconsideration Period Ends 10 Business Days after Preliminary Scoring Letters Released
- Step 2 of Scoring Review and Reconsideration Period, the Escalation Phase ends 5 business days after Step 1.
- TBD - On-Site Reviews
- Mid-September - Scoring Letters to Hospitals



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Data Collection Tool (DCT)



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Accessing the Application

Link: <https://healthportal.pcghealthservices.com/Default.aspx>

Recommended Browser: Google Chrome or Mozilla Firefox



Change Password

New Password should meet the following rules ...

1. At least one lower case letter
2. At least one upper case letter
3. At least one special character
4. At least one number
5. At least 8 characters length

Old Password:

New Password:

Confirm New Password:

Security Questions

If you forget your password you will be asked these security questions you choose here and prompted to enter the answer you specify below

Select Security question1: -- Select --

Security Answer:

Select Security question2: -- Select --

Security Answer:

Select Security question3: -- Select --

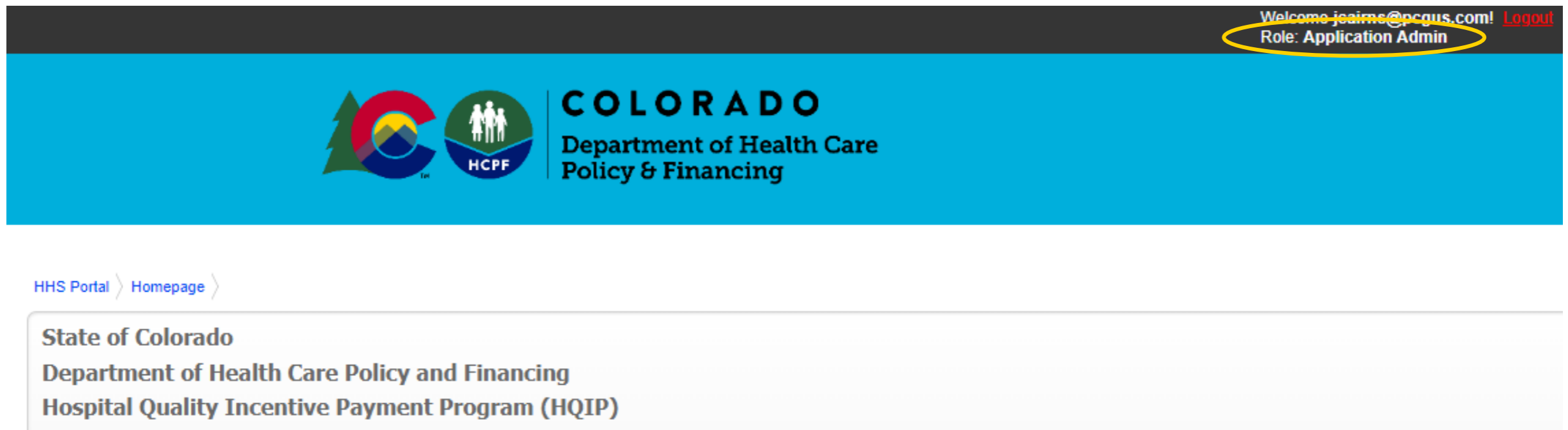
Security Answer:

User Roles

Application Admin: Assigned to HCPF and PCG users

Provider Admin: Highest level of provider access, which allows users to add additional users, edit facility information, and complete and submit HQIP survey

Provider Participant: Allows user to only complete and submit HQIP survey



The screenshot shows a user interface with a dark header bar at the top right containing the text "Welcome jeaimc@pcgus.com! Logout" and "Role: Application Admin" circled in yellow. Below the header is a blue banner with the Colorado Department of Health Care Policy & Financing logo and text. The main content area has a breadcrumb trail "HHS Portal > Homepage >" and a white box containing the text "State of Colorado", "Department of Health Care Policy and Financing", and "Hospital Quality Incentive Payment Program (HQIP)".

Application Dashboard



COLORADO
Department of Health Care
Policy & Financing

[HHS Portal](#) > [Homepage](#)

State of Colorado
Department of Health Care Policy and Financing
Quality Incentive Payment

Please Select Fiscal Year

2024

Please Select Provider

Please Select

User Management

Provider Information Management

HQIP Provider Survey Summary

HQIP Provider Survey

Reports

Facility Documents



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Application Pages

User Management: Adding new users and updating user information

Provider Management: Editing hospital-level information (admin access only)

HQIP Provider Survey: Collecting hospital quality data

HQIP Provider Survey Summary: View all survey measures/questions and track survey progression

Survey Confirmation/Submission: Completing survey attestation by hospital executives

Reports: View hospital's survey questions and answers, survey submission and attestation information, and survey scores



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User Management



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[HHS Portal](#) > [Homepage](#) > [User Management](#)

Add/Edit User

Enter User Information

Select Provider:	00 Public Consulting Group ▼	Select User:	<Add New User> ▼
Contact First Name:	<input type="text"/>	Contact Last Name:	<input type="text"/>
Contact E-mail (Username):	<input type="text"/>	Contact Position:	<input type="text"/>
Contact Phone Number:	<input type="text"/> Ext: <input type="text"/>	Temporary Password:	<input type="text"/>
User Role:	Provider Participant ▼	Active:	<input checked="" type="checkbox"/>
Associated Facilities:	<input type="checkbox"/> Public Consulting Group		



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Provider Management



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[HHS Portal](#) > [Homepage](#) > [Provider Management](#)

Provider Management

Enter Provider Information

Select Provider: <Add New Provider>

Provider Name:

Provider Address:

Provider Fee ID:

Medicaid ID:

Medicare ID:

Provider Phone Number:

Provider Fax Number:

Contact Person: Please Select

Contact Email:

Active:

HQIP Provider Survey



HHS Portal > Homepage >

State of Colorado
Department of Health Care Policy and Financing
Quality Incentive Payment

Please Select Fiscal Year

2024

Please Select Provider

Please Select

User Management

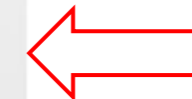
Provider Information Management

HQIP Provider Survey Summary

HQIP Provider Survey

Reports

Facility Documents



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HQIP Provider Survey

1.C Perinatal Depression and Anxiety - Admin View

Facility Name: MJ Testing 6 **Facility Number:** 025 **Year:** 2024
Question ID: 1.c.2 **Quality Measure:** Maternal Health and Perinatal Care Measure Group
Measure Details: [Click here for additional information](#) **Measure Points Available:** 5

1.c.2 For the "Readiness - Clinical Care Setting" criteria, please provide documentation on the mental health screening tools used in the facility for screening during pregnancy/immediate postpartum period as well as any education materials and plans provided to clinicians and support staff on use of the identified screening tools and response protocol.

File may be no larger than 16MB. Accepted file types: PDF, DOC, DOCX, JPG, JPEG, XLS, XLSX

No file found. Please use the Upload tool on the right to attach a file.

Click the icon below to upload attachments



Upload Documents

Provider Name
024 | MJ Testing 5

Performance Measure
Question 1.a.3 - Measure Group 1: Maternal Health and Perinatal Care

Choose Files No file chosen

Associated Notes

Upload Document

Documents

Document Name	Performance Measure	Notes	Uploaded Date		
HQIP 2024 Test Upload Document.docx	1.a.3 Maternal Health and Perinatal Care Measure Group		03/18/2024	Edit	Delete

Documents

Document Name	Performance Measure	Notes	Uploaded Date
HQIP 2024 Test Upload Document.docx	1.a.3 Maternal Health and Perinatal Care Measure Group		03/18/2024
HQIP 2024 Test Upload Document.docx	1.b.5 Maternal Health and Perinatal Care Measure Group		03/18/2024
HQIP 2024 Test Upload Document.docx	1.c.2 Maternal Health and Perinatal Care Measure Group		03/18/2024
HQIP 2024 Test Upload Document.docx	1.c.5 Maternal Health and Perinatal Care Measure Group		03/18/2024
HQIP 2024 Test Upload Document.docx	1.c.6 Maternal Health and Perinatal Care Measure Group		03/18/2024
HQIP 2024 Test Upload Document.docx	1.c.7 Maternal Health and Perinatal Care Measure Group		03/18/2024
HQIP 2024 Test Upload Document.docx	1.d.2 Maternal Health and Perinatal Care Measure Group		03/18/2024
HQIP 2024 Test Upload Document.docx	1.d.6 Maternal Health and Perinatal Care Measure Group		03/18/2024
HQIP 2024 Test Upload Document.docx	1.d.8 Maternal Health and Perinatal Care Measure Group		03/18/2024
HQIP 2024 Test Upload Document.docx	1.e.2 Maternal Health and Perinatal Care Measure Group		03/18/2024
HQIP 2024 Test Upload Document.docx	2.a.6 Patient Safety Measure Group		03/18/2024
HQIP 2024 Test Upload Document.docx	2.a.7 Patient Safety Measure Group		03/18/2024

1 | 2 | 3



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HQIP Provider Survey Summary

Points available and points awarded are displayed on the Measure/Sub-measure level

[HHS Portal](#) > [Homepage](#) > [Summary](#)

Please select a Provider to view Completion Summary:

148 | Public Consulting Group Test Facility

View Selected

Public Consulting Group Test Facility - 2024

Row Color Key: = Not Started = In Progress = Completed = Has Score

▼ Measure Group 1: Maternal Health and Perinatal Care	Not Started	Points Available: 21	Assigned Points: 0
▶ 1.A Exclusive Breast Feeding (PC-05)	Not Started	Points Available: 1	Assigned Points: 0
▶ 1.B Cesarean Section	Not Started	Points Available: 5	Assigned Points: 0
▶ 1.C Perinatal Depression and Anxiety	Not Started	Points Available: 5	Assigned Points: 0
▶ 1.D Maternal Emergencies and Preparedness	Not Started	Points Available: 5	Assigned Points: 0
▶ 1.E Reproductive Life/Family Planning	Not Started	Points Available: 5	Assigned Points: 0
▶ Measure Group 2: Patient Safety	Not Started	Points Available: 64	Assigned Points: 0
▶ Measure Group 3: Patient Experience	Not Started	Points Available: 15	Assigned Points: 0

Survey Confirmation/Submission

HHS Portal > Homepage > Confirmation/Submission >

GM 2 Testing

Attestation of Submission

PLEASE NOTE: Information below must be completed by an executive at a decision making level who is able to attest to the accuracy of the submitted survey data on behalf of your organization.

Please fill out the fields below and check the confirmation checkbox below as an indication that all the information in this application is complete and accurate.

Once you submit, the application will be considered confirmed.

I attest that the information in this application is complete and accurate

[Click here to view the HQIP survey](#)

First Name:	James
Last Name:	Cairns
Position:	Consultant
Phone Number:	(617) 221-8700
Email:	jcaims@pcgus.com
Submitted By:	jcaims@pcgus.com
Submission Date:	3/14/2024

Confirmation: Date Completed: 3/14/2024



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Attestation Confirmation Email

From: noreply@pcgus.com <noreply@pcgus.com>
Sent: Friday, May 1, 2024 1:15 PM
To: <YourEmail@DomainName.com>
Subject: CO HQIP Attestation of Submission Confirmation

To [Your Name],

This email confirms you have completed the "Attestation of Submission" of your survey on 5/1/2024 for [Your Hospital] for the 2024 Colorado Hospital Quality Incentive Payment Program (HQIP). Thank you for submitting your survey data.

Truly, PCG HQIP Team



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Reports

HHS Portal > Homepage > Reports >

Choose A Report

- [Evaluation Detail](#)
- [Score Summary](#)

[Back to Report List](#)

Provider Name: Test Provider 1 Year: 2024

View Report

1 of 2 ? Find | Next

Evaluation Detail Report

Test Provider 1

2024 HQIP Provider Survey

- *Evaluation Detail* report displays all measures, questions, answers and points assigned to questions
- *Score Summary* report displays provider information, total points assigned, submission user, and attestation user



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New DCT Features

- Free navigation between measure groups and measure bundles
- Automated Attestation of Submission confirmation email
- Active HQIP Program Year featured throughout survey pages
- Accepted file types expanded to include .XLS, .XLSX



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Live Demo



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Scoring Review and Reconsideration Process



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Scoring Review and Reconsideration Process

- There will be a formalized period for hospitals to review their preliminary score and request scoring adjustments from the Department. This is for instances where you believe the preliminary score for any measures may be in error.
- Preliminary scores will be entered into the DCT within 90 days of DCT Close. Hospitals will be notified that their scores are ready for review. This will begin the reconsideration period.



Scoring Review and Reconsideration Process: Step 1

- Hospitals will have 10 business days to review their HQIP scores and request any applicable reconsiderations. During this time, no additional documentation will be accepted. Reconsideration requests after this period will also not be considered.
- Hospitals must complete the Microsoft Form (link will be provided with the Preliminary Scoring Letter). Reconsideration requests received via email will be considered invalid. All requests must be received through the form and submitted within 10 business days of the receipt of the Preliminary Scoring Letter. The end of this 10-business day period marks the close of Step 1 of the SRRP.



Scoring Review and Reconsideration Process: Step 2

- The Department will review each reconsideration request and make a redetermination. Once a decision has been made, the Department will notify the hospital of the reconsideration decision. If a scoring error is identified, the Department will adjust the score and notify the hospital. Likewise, the Department will notify the hospital if the reconsideration is denied and no scoring adjustment is warranted. The Department will respond to requests within 10 business days of the closing of the SRRP Requests (Step 1). The end of this 10-business day period marks the close of Step 2 of the SRRP.
- If the hospital is not satisfied with their reconsideration decision, they may request escalation to the Special Financing Division Director. Escalations must be made within 5 business days of the end of the SRRP Determinations (Step 2). The Department will respond to all escalation requests within ten business days of the end of the SRRP Determinations (Step 2).



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Contact Information

Program-Related Questions

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DCT-Related Questions

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Questions?



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Thank You

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